

A new kind of threat to security?

Health
Down
16.12.02

By Ashfak Bokhari

DURING a trip to India last month, Bill Gates of Microsoft was accused of "spreading panic" by New Delhi when he warned of a serious AIDS crisis that India may confront by the end of the current decade and also announced a 100 million dollar grant towards a project designed to contain the disease in the country.

What Gates was referring to is a US government study released in September that identifies five countries, including India, where AIDS epidemic is advancing in a manner that it may soon pose security threats to their regions and also to the United States. The other countries are: China, Russia, Nigeria and Ethiopia. These countries constitute 40 per cent of the world's population and by 2010, when the next wave of HIV/AIDS is likely to hit the world, the number of infected people in these countries will grow to an estimated 50-75 million from the current 14-23 million and will, thus, leave behind sub-Saharan Africa where the number of cases will then be 30-35 million.

The study has been carried out by the National Intelligence Council (NIC) which prepares strategic analysis of the possible developments for the US president, the CIA, the defence and state departments, the national security council and other government agencies. The new document called "The next wave of HIV/AIDS" follows a report the council released two years ago which assessed publicly for the first time the issue of the global AIDS pandemic as a threat to US security.

The argument is that such a huge number of HIV cases could harm the economic, social, political and military structures in each of the five countries by fuelling tensions over spending priorities, raising health care costs and aggravating military manpower shortages. In Russia, the next-wave epidemic is likely to help shape the contours of the post-Soviet era. Already, one-third of prospective military conscripts there are deemed unfit for service because of HIV, and chronic Hepatitis-C from drug abuse.

A similar report has been issued by a Washington-based think-tank, namely, Centre for

the status of China and India of being the major regional players. Of the estimated 35 million infected around the world, 25 million live in the sub-Sahara region at present.

How real is the AIDS threat has become difficult to assess. Indian health minister's reaction to Bill Gates' warning was no different from South African President Mbeki's refusal to accept two years ago that the American health establishment's definition of AIDS was equally valid in the African situation. More controversial has been the estimates regarding scope of the epidemic as calculated by the US authorities. There is a myth that worldwide 33 million people have died of AIDS. The fact is that only three million have ever been given a diagnosis of the disease, according to World Health Organization. The likely number of HIV positive cases worldwide is sometimes cited as being 35

AIDS is now an international security issue because of its potential to create security challenges and its ability to undermine international capacity to resolve conflicts. In economic terms, if the adult prevalence rate goes up to 20 per cent, a nation should expect a decline in its GDP of one per cent per annum. AIDS and global insecurity coexist in a vicious cycle.

million and at other occasions as 42 million.

Even in case of Pakistan, the probable figure of AIDS cases continues to rise. It is 80,000 now. It was 50,000 two years ago. The fact is that only 1,700 have so far tested HIV positive while full-blown cases of AIDS are mere 230.

The NIC report expects the number of infection cases to surge to 20-25 million in India — highest ever in a country — from present 5 to 8 million, to 10-15 million in China from one million at present, also 10-15 million in Nigeria from 4 to 6 million, to 5-8 million in Russia from two lakh and to 7-10 million in Ethiopia from current estimate of 3 to 5 million. These estimates appear too high but the NIC con-

als, families, economic institutions, military and police forces — and have broader security consequences both for the nations under assault and for their neighbours. And if India is to suffer widespread infection by 2010, Pakistan cannot escape its effects.

It is an international security issue because of its potential to create security challenges and by its ability to undermine international capacity to resolve conflicts. And in economic terms, the World Bank says, if the adult prevalence rate goes up to 20 per cent, a nation should expect a decline in its GDP of one per cent per annum. AIDS and global insecurity coexist in a vicious cycle, says the UNAIDS chief Peter Piot. Civil and international conflicts help spread HIV as populations are destabilized and armies move across new territories.

The UN secretary-general Kofi Annan has now called for a "war chest" with the support of the World Bank president James Wolfensohn because a comprehensive response would require a commitment of at least ten billion dollars per year. Meanwhile, the UNAIDS and the ICG have signed a cooperation framework in a bid to strengthen leadership and build partnerships in the area of AIDS and security. On the eve, the ICG chief said, "We have seen that AIDS has devastated an entire generation in sub-Saharan Africa and in some countries reaching nearly 40 per cent of the adult population".

The Horn of Africa continues to be politically important for the US. It expects Ethiopia to play a major political and military role in the region but the problem is that its army is believed to be highly infected. Many Ethiopian soldiers contracted HIV during the civil war in the 1980s by having multiple sex partners. When the war ended in 1991, thousands of infected soldiers and prostitutes, while returning home, brought HIV and AIDS to their villages and towns.

The CSIS report predicts "the disappearance of peacekeeping forces and other restraining factors and eventually of major state failure... This threat to Africa is not the one it (the US) can ignore. It's real..." But what the US is willing to ignore is the role of its foreign policy in creating this situation. It is a hard fact is that the wars fomented by the

chronic Hepatitis C
base.

A similar report has been issued by a Washington-based think-tank, namely, Centre for Strategic and International Studies (CSIS) titled "Destabilizing Impact of HIV/Aids." And yet another study undertaken by the International Crisis Group in June this year projects a much higher figure of the likely infection cases by 2005. It is 100 million. The CSIS says its study is intended to provide world leaders with "strategic insights" on emerging global issues and to "strengthen the US response to these emerging challenges."

But many observers consider these studies as somewhat "exaggerated" in their estimates. While the second wave of the AIDS is considered an undeniable fact, the kind of havoc it may cause looks improbable. Even epidemiologists at UNAIDS, a joint body of the World Bank and the United Nations, have questioned the validity of the NIC projections. Neff Walker, an epidemiologist at UNAIDS has called the report as "a worst-case scenario" and said, "they could be right but they are not probable."

The 'worst-case scenario' may be intended, in a way, to warn and demoralize the two emerging economic giants — China and India — which are likely to

lakh and to 7-10 million in Ethiopia from current estimate of 3 to 5 million. These estimates appear too high but the NIC contends that it is so because governments maintain low estimates as they "do not want to acknowledge the extent of the epidemic." There is no doubt that many cases go unreported because the disease is seen as a social stigma by the patients. Mostly, the sex workers, drug users and truck drivers are the main carriers of the disease in China, India and Pakistan.

Nigeria and Ethiopia are projected to be the hardest-hit in the second wave and the epidemic is likely to decrease economic growth and discourage foreign investment. In case of Nigeria, the CSIS report says, the United States, as Colin Powell told the Senate last year, "looks to a strong Nigeria to transform the prospects of people across Africa." The US has been providing finance and training to the Nigerian army to enable it to act as its proxy force in West Africa which is becoming strategically important as a source of oil. AIDS threatens to disrupt that strategy.

There is no doubt that weakened militaries leave a vacuum at home and abroad which gangs, terrorist organisations and guerilla groups can feel too tempted to fill. In Africa, the ICG report says, armed forces in

role of its foreign policy in creating this situation. It is a hard fact is that the wars fomented by the US in the Horn of Africa have resulted in the spread of the AIDS which, in turn, has driven poor countries into poverty and debt traps.

However, China and India have the ability to contain the disease. The key source of the spread in China is migration — about 100 million villagers are currently on the move to resettle in cities. Russia's prison amnesty programmes under which those released are mostly infected and the rise in prostitution can worsen the epidemic there. But, though the report won't say, equally responsible has been the Russia's abrupt transition to capitalism that has devastated the country's economy and shattered social structure. The rise in unemployment and despair has caused an increase in drug abuse and prostitution.

Although the next-wave countries are likely to have a faster spread of the disease in the years to come, the growth of economic globalization, travel, migration and tourism can equally affect the western countries including those which have succeeded in reducing both deaths and infection during the past decade. The epidemic will also have a serious impact on the movement of capital. So, the AIDS will also create insecurity for the US citizens at

Rural health facilities to be improved

Health
Nation
15/11/03

Tahir hints at recruitment of doctors on better packages

By Mansab Dogar

LAHORE- Newly inducted Punjab Minister for Health Dr Tahir Ali Javed on Tuesday said improvement of health facilities in the rural areas would be the prime focus of the present government.

While giving an interview to *The Nation*, he also talked about the much hyped and controversial issue of constitution of Board of Governors in the public hospitals, upgradation of health facilities in the rural areas, regulation of private clinics and hospitals, introduction of health insurance policy and recruitment of doctors and specialists on contract basis in Basic Health Units, (BHUs), Rural Health Centres (RHCs) and Tehsil and District Headquarters Hospitals.

Dr. Tahir is the only bone marrow transplant specialist in the country. Until his nomination as Provincial Minister, he was a professional doctor. His father, Nemat Ali, a scientist, is Tehsil Nazim of Shakargarh. Quite recently, Dr.Tahir has been very busy in the construction of a hospital and a college in his region.

Enumerating his future plans, the minister said that health department will leave no stone

unturned in the rural areas, par with those of the urban hospitals.

To a question, he said the recruitment of doctors and specialists on contract basis with better salary packages is under process to provide better health care facilities to the rural folk.

Reacting to a question, he said more posts of doctors would be created to cater to the growing needs of rapidly increasing population in the province.

About his style of governance, the minister said he would be more than willing to listen to the point of view of all the concerned quarters on any issue facing the health sector. Tahir Ali, however, made it clear that genuine stakeholders in the health system were the patients whose welfare was the primary responsibility of the state.

About the BoGs, he declined to give any comment saying 'the matter was pending before the commission constituted by the chief minister, whose report is yet to be finalised'.

To a question as to what would be the position of the the government if the Joint Action Committee did not accept the decision of the commission, the minister stated that the government would take appropriate

was inspired and encouraged by President Musharraf's visit to Washington D.C.during which the latter had passionately called upon the young Pakistani expatriates to venture into the Pakistani politics.

He said it was the responsibility of the state to guarantee the fundamental public rights of health and education. Brimming with the confidence to give a dynamic start to his new assignment as the Health Minister, Dr Tahir maintained that being a public representative, he was committed to undertake schemes for public welfare. Only the public interest will be his guiding principle, he added.

Dr. Tahir Ali also shared his experience of paying surprise visits to the public hospitals to get the first hand knowledge of the problems faced by the patients there.

Giving details, he informed that disguised as a common patient, he visited Sir Ganga Ram Hospital Lahore at night without letting himself recognised by the staff on duty.

The doctor also pledged to evolve an effective modus operandi to regularise the private clinics.

When his attention was

remarked: "There is no gainsaying the reality. But the thrust will be shifted from mismanagement to management".

To make for the want of resources, international donor agencies would be approached and convinced to launch various schemes of public welfare , the minister maintained.

The doctor-cum-politician said that he would make every effort to restore the trust of the donor agencies and ensure proper and transparent utilisation of any aid offered by them.

He asserted that he would mobilise the office of the Director General Health to expedite the implementation of the policy decisions taken by the department.

To the query of the provision of free medicines in the hospitals, he said no single country in the world could afford such an exercise which involved billions of rupees. Instead, the government would take steps to ensure their free provision in the emergencies of the hospitals, he said.

The U.S. qualified doctor opined the government will endeavour to put curbs on the illegal practice of quackery in the province. To another question, that the shortage of equipments in different